

<b>FOR IRB USE ONLY</b>		<b>ILLINOIS RACING BOARD</b>		<b>DRIVERS LICENSE</b>	
LICENSE#:		Suite 7-701 James R. Thompson Center Chicago, Illinois 60601 (The application fee is <b>NOT</b> refundable) <b>IMPORTANT NOTICE:</b> This state agency is requesting disclosure of info that is necessary to accomplish the statutory purpose as outlined under the Illinois Horse Racing Act, Section 15. Disclosure of this information is <b>REQUIRED</b> . Failure to provide complete information may result in your license not being issued or renewed. The application fee is not refundable and is to be submitted only if you are participating in a race meeting within the calendar year.		LIC #.	
DATE:				STATE	
LICENSE CLERK:				VEHICLE INFORMATION	
TRACK:				MAKE:	
				PLATE #:	
<b>License Year</b> <b>2012</b>		<b>LICENSE APPLICATION FORM</b>		<input type="checkbox"/> <b>NEW APPLICANT</b>	
				<input type="checkbox"/> <b>RENEWAL</b>	

☐ **HARNESS**
☐ **QUARTER HORSE**
☐ **THOROUGHBRED**

<b>ILLINOIS RACING BOARD</b>	<b>ARLINGTON PARK</b>	<b>BALMORAL PARK</b>	<b>FAIRMOUNT PARK</b>	<b>HAWTHORNE RACE COURSE</b>	<b>MAYWOOD PARK</b>
<i>License Office</i>	2200 W. EUCLID	26435 S. DIXIE HWY	9301 COLLINSVILLE RD.	3501 S. LARAMIE	8600 W. NORTH AVE.
<i>Address:</i>	ARLINGTON HTS, IL 60006	CRETE, IL 60417	COLLINSVILLE, IL 62234	CICERO, IL 60804	MELROSE PARK, IL 60160
	847-255-4300 x7618	708-672-1414 x 213	618-345-4300 x 143	708-780-3700 x 3741	708-343-4800 x 297
	847-483-9873 FAX	708-672-4208 FAX	618-346-5185 FAX	708-652-1097 FAX	708-681-1864 FAX

LICENSE AS:		\$25 FEE			\$15 FEE			\$10 FEE		\$ 5 FEE	
<input type="checkbox"/> OWNER	<input type="checkbox"/> APPRENTICE	<input type="checkbox"/> JOCKEY	<input type="checkbox"/> TOTALISATOR EMP	<input type="checkbox"/> APPRENTICE	<input type="checkbox"/> OFF	<input type="checkbox"/> ASSISTANT	<input type="checkbox"/> ANIMAL	<input type="checkbox"/> PONY	<input type="checkbox"/> VENDOR	<input type="checkbox"/> HOTWALKER	
<input type="checkbox"/> TRAINER	<input type="checkbox"/> JOCKEY	<input type="checkbox"/> AGENT	<input type="checkbox"/> AUTHORIZED	<input type="checkbox"/> BLACKSMITH	<input type="checkbox"/> TRACK	<input type="checkbox"/> TRAINER	<input type="checkbox"/> HEALTH	<input type="checkbox"/> PERSON	<input type="checkbox"/> HELPER	<input type="checkbox"/> GROOM	
<input type="checkbox"/> DRIVER	<input type="checkbox"/> OWNER/ASST	<input type="checkbox"/> RACING	<input type="checkbox"/> AGENT	<input type="checkbox"/> VENDOR	<input type="checkbox"/> STABLING	<input type="checkbox"/> VETERINARIAN	<input type="checkbox"/> TECH	<input type="checkbox"/> EXERCISE PERSON	<b>NO FEE</b>		
<input type="checkbox"/> JOCKEY	<input type="checkbox"/> TRAINER	<input type="checkbox"/> OFFICIAL	<input type="checkbox"/> OTHER	<input type="checkbox"/> BLACKSMITH	<input type="checkbox"/> CENTER	<input type="checkbox"/> ASSISTANT	<input type="checkbox"/> OTHER	<input type="checkbox"/> FOREMAN	<input type="checkbox"/> RACETRACK		
<input type="checkbox"/> INTERTRACK EMPLOYEE	<input type="checkbox"/> BUSINESS AGENT	<input type="checkbox"/> VETERINARIAN	<input type="checkbox"/> OTHER	<input type="checkbox"/> OTHER	<input type="checkbox"/> OTHER	<input type="checkbox"/> OTHER	<input type="checkbox"/> OTHER	<input type="checkbox"/> EMPLOYEE			

<b>2. NAME: LAST FIRST M.I. (MAIDEN)</b>		<b>3. SOCIAL SECURITY NUMBER</b>													
<b>4. HAVE YOU EVER HAD ANY LICENSE, OF ANY TYPE DENIED, SUSPENDED OR REVOKED BY ANY FEDERAL, STATE OR LOCAL GOVERNMENT AGENCY, OR BEEN EXPELLED FROM ANY RACETRACK BY A RACING ASSOCIATION OFFICIAL?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>10. GIVE YOUR PAST 3 YEARS EMPLOYMENT HISTORY</b> <table border="1"> <thead> <tr> <th>YEAR</th> <th>POSITION</th> <th>EMPLOYER</th> </tr> </thead> <tbody> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td></tr> </tbody> </table>		YEAR	POSITION	EMPLOYER									
YEAR	POSITION	EMPLOYER													
<b>5. HAVE YOU EVER PLED GUILTY OR NOLO CONTENDERE, BEEN FOUND GUILTY OR BEEN CONVICTED OR FORFEITED BAIL, OR BEEN FINED FOR ANY CRIMINAL OFFENSE EITHER FELONY OR MISDEMEANOR INCLUDING DRIVING UNDER THE INFLUENCE OF ALCOHOL?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>11. YOUR TRAINER'S NAME:</b> _____ <b>12. NAME YOU WISH TO RACE UNDER. LIST STABLES AND PARTNERSHIPS UNDER WHICH YOU ARE RACING:</b> _____ _____ _____													
<b>6. ARE YOU NOW UNDER CHARGES FOR ANY CRIMINAL OFFENSE INCLUDING DRIVING UNDER THE INFLUENCE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>13. OWNERS: LIST ALL HORSES CURRENTLY RACING, OWNED WHOLLY OR IN PART BY YOU OR LEASED TO YOU. INDICATE IF LEASED</b> <table border="1"> <tbody> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> <tr><td> </td><td> </td></tr> </tbody> </table>													
<b>7. HAVE YOU EVER BEEN THE SUBJECT OF ANY RULE VIOLATION IN ANY RACING JURISDICTION WHERE YOU WERE FINED MORE THAN \$250.00 OR (JOCKEY'S ONLY) SUSPENDED FOR RIDING VIOLATIONS OF 9 DAYS OR MORE?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>14. VENDOR'S FEDERAL TAX NUMBER:</b> _____													
<b>8. HAVE YOU OR A MEMBER OF YOUR IMMEDIATE FAMILY: (A) EVER BEEN EMPLOYED BY OR ASSOCIATED WITH A BOOKMAKER OR ANY GAMBLING OR ILLEGAL ESTABLISHMENT, OR (B) EVER OWNED OR OPERATED A HANDBOOK OR OTHER ILLEGAL ESTABLISHMENT?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>15. VETERINARIAN'S IL D.P.R. NUMBER:</b> _____ <b>EXPIRATION DATE:</b> _____													
<b>9. HAVE YOU EVER BEEN LICENSED IN ANY STATE UNDER A DIFFERENT NAME?</b> <input type="checkbox"/> Yes <input type="checkbox"/> No		<b>16. HARNESS ONLY: U.S.T.A. ID NUMBER:</b> _____													

IF YOU ANSWERED "YES" TO QUESTIONS 4 THRU 9, GIVE THE YEAR, STATE, RACETRACK AND DETAILS OF THE INFRACTION ON BACKSIDE:

ADDITIONAL SPACE ON BACKSIDE TO ANSWER 4 THRU 13

<b>17. ADDRESS (MAILING)</b>					<b>27. MARITAL STATUS</b> <input type="checkbox"/> <b>MARRIED</b> <input type="checkbox"/> <b>SINGLE</b>	
<b>(CITY, TOWN OR POST OFFICE, STATE AND ZIP CODE)</b>					<b>28. GIVE NICKNAMES OR OTHER NAMES YOU ARE KNOWN BY:</b>	
<b>18. TELEPHONE (HOME)</b>		<b>(BUSINESS)</b>			<b>29. SPOUSE'S FULL NAME:</b>	
		<b>(FAX)</b>			<b>30. ALIEN STATUS (CHECK ONE)</b> <input type="checkbox"/> <b>USA CITIZEN</b>	
<b>(MOBILE-CELL)</b>		<b>(E-MAIL)</b>			<input type="checkbox"/> <b>USA NATURALIZED CITIZEN (ID #)</b>	
<b>19. DATE OF BIRTH</b>		<b>20. SEX</b>	<b>21. HEIGHT</b>	<b>22. WEIGHT</b>	<input type="checkbox"/> <b>PERMANENT RESIDENT (ID #)</b> <b>Exp:</b>	
					<input type="checkbox"/> <b>TEMPORARY RESIDENT (PERMIT #)</b>	
<b>24. EYES</b>		<b>25. SCARS, MARKS, TATTOOS</b>		<b>26. PLACE OF BIRTH</b>		
				<b>31. IN CASE OF AN EMERGENCY, CONTACT:</b>		
				<b>NAME:</b> <b>PHONE:</b>		

<b>ADDITIONAL SPACE TO DETAIL ANSWERS FROM QUESTIONS 4 THRU 13. PLEASE INDICATE THE QUESTIONS NUMBER ANSWERED</b>

I UNDERSTAND THAT BY ACCEPTING THIS ILLINOIS RACING BOARD LICENSE, I AM SUBJECT TO INSPECTIONS AND SEARCHES OF MY PERSON AND PROPERTY ON THE GROUNDS OF A RACING ASSOCIATION AS DEFINED WITHIN THE RULES OF THE ILLINOIS RACING BOARD (11 ILLINOIS ADMINISTRATIVE CODE).

UNDER THE PENALTIES PROVIDED FOR BY THE LAWS OF THE STATE OF ILLINOIS I CERTIFY THAT THE INFORMATION SUBMITTED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I HEREBY AUTHORIZE THE ILLINOIS RACING BOARD AND THE DEPARTMENT OF STATE POLICE TO INVESTIGATE AND VERIFY ALL INFORMATION CONTAINED IN THIS APPLICATION. I HAVE READ AND UNDERSTAND THE RULES AND REGULATIONS OF THE ILLINOIS RACING BOARD AND AGREE TO BE BOUND THEREBY.

### IMPORTANT

THE BOARD MAY REFUSE TO ISSUE OR MAY SUSPEND THE OCCUPATION LICENSE OF ANY PERSON WHO FAILS TO FILE A RETURN, OR TO PAY THE TAX, PENALTY OR INTEREST, AS REQUIRED BY ANY TAX ACT ADMINISTERED BY THE ILLINOIS DEPARTMENT OF REVENUE UNTIL SUCH TIME AS THE REQUIREMENTS OF ANY SUCH TAX ACT ARE SATISFIED

APPLICANT'S SIGNATURE			DATE	
TRAINER'S SIGNATURE			TRAINER'S NAME (PRINT)	
NOT REQUIRED FOR OWNERS			DATE	
<u>  X  </u> STATE VETERINARIAN	<u>  X  </u> TRACK MANAGEMENT		<u>  X  </u> OUTRIDER	

### DENIED

WE, THE UNDERSIGNED STEWARDS, APPOINTED BY THE ILLINOIS RACING BOARD, DO HEREBY RECOMMEND TO THE ILLINOIS RACING BOARD THAT THIS LICENSE BE DENIED FOR THE YEAR **2012**:

STATE STEWARD	STATE STEWARD	ASSOCIATION STEWARD
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### APPROVED

WE, THE UNDERSIGNED STEWARDS, APPOINTED BY THE ILLINOIS RACING BOARD, DO HEREBY RECOMMEND TO THE ILLINOIS RACING BOARD THAT THIS LICENSE BE APPROVED FOR THE YEAR **2012**:

STATE STEWARD	STATE STEWARD	ASSOCIATION STEWARD
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